PART B - FEE(S) TRANSMITTAL Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 MAY 0 5 2006 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885 INSTRUCTIONS This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where the property further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as increased unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications. Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. 04/04/2006 Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. BERND W. SANDT 900 Deerfield Court Midland, MI 48640 05/08/2006 EAREGAY2 00000072 190135 09964120 (Signature 700.00 DA 01 FC:2501 300.00 DA 02 FC:1504 (Date APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. BWS-00-07 9970 09/964,120 09/25/2001 Marvin L. Schilling TITLE OF INVENTION: METHOD FOR PRODUCING BIOLOGICALLY ACTIVE PRODUCTS APPLN. TYPE SMALL ENTETY ISSUE FEE **PUBLICATION FEE** TOTAL FEE(S) DOE DATE DUE **S4**700 \$1460 \$300 07/05/2006 nonprovisional **EXAMINER** ART UNIT **CLASS-SUBCLASS** GOLLAMUDI, SHARMILA S-426-465000 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY) (A) NAME OF ASSIGNEE Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☐ Corporation or other private group entity ☐ Government 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): ☐ Issue Fee A check in the amount of the fee(s) is enclosed. ☐ Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the equired fee(s), or credit any overpayment, to Advance Order - # of Copies (enclose an extra copy of this form). Deposit Account Number 5. Change in Entity Status (from status indicated above)

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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

Authorized Signature

Typed or printed name

Registration No

b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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